

**Appendix 4: Quality of randomized trials of therapy for diastolic heart failure (part 1 of 2)**

Study*	Intervention	Concealment of allocation	Follow-up of patients	Blinded assessment of primary outcome(s)	Blinding of patients	Groups similar at baseline	Reliable primary outcome measure (s)	Groups treated equally	Intention-to-treat analysis
<b>ACE inhibitors, angiotensin-receptor blockers</b>									
Cleland et al, PEP-CHF, (n = 850) <sup>27</sup>	perindopril	Y	Excellent - 4 patients lost to follow-up	Y	Y	Y	Y	N	Y
Zi et al (n = 74) <sup>28</sup>	quinapril	Not specified	4 (5.4%) patients withdrawn, 2 (2.7%) died	Y	Y	Y	Y	Y	Not specified
Lang et al (n = 12) <sup>30</sup>	lisinopril	Not specified	Complete	Y	Y	Y	N	Y	Not specified
Aronow et al (n = 21) <sup>31</sup>	enalapril	Not specified	Not specified	N	N	Y	Y	Y	Not specified
Yip et al (n = 151) <sup>29</sup>	ramipril vs irbesartan vs conventional (three arms)	Y	10 (6.6%) patients withdrawn, 4 (2.6%) died	Y	N	Y	Y	Y	Not specified
Yusuf et al, CHARM-preserved (n = 3023) <sup>32</sup>	candesartan	Y	Excellent, 3 lost to follow-up	Y	Y	Y†	Y	Y	Not specified
<b>Beta blockers</b>									
Aronow et al (n = 158) <sup>34</sup>	propranolol	Not specified	Not specified	N	N	Y	Y	Not specified	Y
Takeda et al (n = 40) <sup>35</sup>	carvedilol	Not specified	Not specified	N	N	Y	Y	Y	Not specified
Flather et al, SENIORS (total n = 2128, DHF n = 752) <sup>33</sup>	nebivolol	Y	7 excluded, 37 lost to follow-up, 98.4 % patient years observed/total	Y	Y	Y	Y	Y	Y

**Appendix 4:** Quality of randomized trials of therapy for diastolic heart failure (part 2 of 2)

Study*	Intervention	Concealment of allocation	Follow-up of patients	Blinded assessment of primary outcome(s)	Blinding of patients	Groups similar at baseline	Reliable primary outcome measure (s)	Groups treated equally	Intention-to-treat analysis
<b>Other pharmacologic therapies</b>									
Hung et al (n = 15) <sup>37</sup>	calcium-channel blocker: verapamil	Not specified	Complete	Y	Y	Y	N	Y	Not specified
Ahmed et al, DIG ancillary (n = 988) <sup>36</sup>	digoxin	y	98.9% complete	Y	Y	Y	Y	Y	Y
Cohn et al, Vheft (n = 83) <sup>38</sup>	nitrates and hydralazine	Not specified	Not specified	Not specified	Y	Not specified	Y	Not specified	Not specified
<b>Nonpharmacologic therapies</b>									
Galbreath et al (total n = 1069, DHF n = 317) <sup>43</sup>	disease management program	Not specified	32.6% did not complete study, 8.7% died, rest lost, withdrew or disqualified	N	N	Y	Y	Y	Y
Gary et al (n = 32) <sup>39-41</sup>	12 week walking program	Y	At 6 months, 4 patients withdrawn	N	N	Y	Y	Y	Not specified

Note: ACE = angiotensin-converting-enzyme inhibitor, DHF = diastolic heart failure.

\*References are available in the main text of the article ([www.cmaj.ca/cgi/content/full/180/5/520](http://www.cmaj.ca/cgi/content/full/180/5/520)).

†Although 3023 patients were randomly allocated, authors did comment that several baseline characteristics associated with poorer prognosis were slightly more common in intervention group, and various characteristics/treatments associated with lower mortality were slightly less common in the intervention group.